IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.lowa.gov/ethics

Reset Form

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

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Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

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Audited _		
Checked		<u>-</u>

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	т:			
DHS - Glenwood Resource Center				
Name of Department or Office	anyood lawa \$1524			
Malling Address Ci	Glenwood, Iowa 51534 City, State, Zip Code			
712-525-1252 Area Code & Telephone No.				
L CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC				
James Thompson				
Name				
Malling Address (if different from above)	City, State, Zip (if different from above)			
Email Address	Area Code & Telephone Number (if different from above)			
Anonymous donation to GRC				
711 S. Vine St. Glenwood, IA 51534				
Mailing Address City, State, Zip Code	3/25/19 \$40,65			
712-525-1252	Date of Gift or Bequest Amount/Value*			
Area Code & Telephone Number	*value is defined as "falr market value" of item as determined by			
Email Address (optional)	receiving department or office. If no value mark "0.00".			
Provide a description of the gift or bequest and purpose thereof:				
Anonymous donation of IA \$.05 Deposit containers - Resource Center.	for activities of individuals residing at Glenwood			
Criteria to use this form:				
Receipt of any gift or bequest that is received by any department of the sta	ate or received by the Governor on behalf of the state.			
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tatement of Affirmation:				

S

James Thompson I, James 1 nompson affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

RECEIPT OF DONATION

(Please send to Ruth Messinger #23)

PERSON/ORGANIZATION:	GRC Donation			
,	Donor Name			
		•		
	Address			
	City, State, Zi	p Code		
ITEMS DONATED:	They Cans			
DROP OFF LOCATION:	Can Redemption	· · · · · · · · · · · · · · · · · · ·		
DONORWALLATION OF	ille 15	804 cano @ 80.05 ea		
DONOR VALUATION OF ITEM(S):	\$ 40 65	9 plastic @ \$ 0.05 la		
11211(0).				
DONORS EXPECTION OF USE:	ors expection of use: Qun Jundo			
	, 0			
	(i.e. donation to a specific hot	use, Campbell Park, etc.).		
DATE RECEIVED:	3-25-19			
DATE RECEIVED:	76311			
GRC SUPERVISOR RECEIVING	Doiana Samar			
DONATION:				
COMMENTS/NOTES:				